



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000005

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: GEORGE F. HENDERSON INC

DOING BUSINESS AS THE MILEPOST TAVERN

ADDRESS 581 TREMONT ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: JOHNSON, JOHN F. TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY BLDG WITH DINING ROOM, LOUNGE BAR, BASEMENT AND STORAGE IN REAR. ENTRANCES ON TREMONT AND CHESTNUT STS. SERVICE ENTRANCES AND EXITS IN THE REAR

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000006

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: WINSOR RESTAURANT GROUP, INC

DOING BUSINESS AS WINSOR HOUSE INN & RESTAURANT

ADDRESS 390 WASHINGTON ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: O'CONNELL,
DAVID M

TYPE OF LICENSE: Innholder

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO STORY WOOD FRAME BLDG. FIRST FLOOR; SEVEN ROOMS; SECOND FLOOR; SEVEN ROOMS; CELLAR FOR STORAGE. SEVEN ENTRANCES AND EXITS

I hereby certify and swear under penalties of perjury that:

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2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000007

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DUXBURY VETERANS CLUB, INC.

DOING BUSINESS AS

ADDRESS WEST & TREMONT ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: DIMUZIO,
LEONARD JR.

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

1 1/2 STORY WOOD FRAME BLDG. 3 ENTRANCES ALSO USED AS EXITS. TWO EXITS FROM BASEMENT WHICH HAS KITCHEN, DINING ROOM, GAME ROOM. MAIN FLOOR ; LOUNGE, BAR AREA, BACK STORAGE ROOM. 2ND FLR; OFFICES. STORAGE BELOW

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000012

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: OSBORNS COUNTRY STORE, INC

DOING BUSINESS AS OSBORN'S COUNTRY STORE

ADDRESS 632 SUMMER ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: SANDERS,
GREGORY D

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

WOOD SIDED BLDG. ONE FLOOR IS AN UNUSED ATTIC. CELLAR FOR STORAGE AND EQUIPMENT. ONE PUBLIC ENTRANCE AND EXIT AT SOUTHWEST CORNER EMERGENCY EXITS AND ENTRANCE ON SOUTH AND EAST SIDES OF BLDG

I hereby certify and swear under penalties of perjury that:

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APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000013

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: JAY VEERAM CORP.

DOING BUSINESS A BENNET'S GENERAL STORE

ADDRESS 136 TREMONT STREET

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: PATEL, AANAL

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

2 STORY FRAME HOUSE WITH GOODS DISPLAYED AND SOLD IN ONE ROOM ON STREET FLOOR. FIRST FLOOR CONSISTS OF 3 ROOMS AND 2ND FLR CONSISTS OF 4 ROOMS, WITH STORAGE SPACE IN THE CELLAR, 2 ENTRANCES FROM TREMONT ST

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000015

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: JOSEPH CARROLL

DOING BUSINESS AS DUXBURY WINE & SPIRITS

ADDRESS 1 WASHINGTON & STANDISH STS

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER:

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO ROOMS ON FIRST FLOOR FOR RETAIL SALES WITH 2 ENTRANCES. ONE EXIT IN REAR FOR DELIVERIES

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000021

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DUXBURY PROVISIONS, INC.

DOING BUSINESS AS MILLBROOK MARKET

ADDRESS 282 ST. GEORGE STREET

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: DURANT, SUSAN

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

RETAIL SPACE WITH A SPACE FOR STORAGE IN REAR. TWO DOORS FACING SAINT
GEORGE STREET. TWO DOORS IN THE REAR FOR SERVICE.

I hereby certify and swear under penalties of perjury that:

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EMPLOYER IDENTIFICATION NUMBER:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000022

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: LA MAISON DU VIN, INC

DOING BUSINESS AS

ADDRESS 459 WASHINGTON ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02330

MANAGER: WEISS, ROBERT S. TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FIRST FLOOR SHOP IN A MIXED USE BUILDING WITH TWO MEANS OF EGRESS FRONT
AND REAR

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TELEPHONE NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000023

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: TSANG'S CAFE, INC.

DOING BUSINESS AS

ADDRESS 45 DEPOT ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: TSANG, WAYNE

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ON THE GROUND FLOOR AND BASEMENT. WOODEN STRUCTURE WITH WINDOWS IN THE FRONT; ONE FRONT ENTRANCE AND TWO BACK EXITS AND A WOODEN DECK

I hereby certify and swear under penalties of perjury that:

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DATE:



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000024

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: THE VILLAGE AT DUXBURY HOMEOWNERS COOPERATIVE
CORP

DOING BUSINESS AS THE VILLAGE AT DUXBURY

ADDRESS 290 KINGS TOWN WAY

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: Alexander, Carey

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

A PRIVATE SENIOR RETIREMENT COMMUNITY COMPRISING OF 168 APARTMENTS.
CONSISTS OF 3 DINING AREAS, BAR, MEETING ROOM, PARLOR, LOUNGES AND VARIOUS
OUTDOOR PATIOS

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000028

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: BBC DUX INC

DOING BUSINESS AS CASEY'S FINE WINE & SPIRITS

ADDRESS 35 DEPOT ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: CASEY, BONNIE

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

END UNIT OF A WOOD FRAME BLDG HAVING ONE FLOOR WITH ONE AREA USED FOR
RETAIL SALES AND STORAGE WITH CELLAR USED FOR STORAGE

I hereby certify and swear under penalties of perjury that:

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TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000031

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: THOMAS BISSETT

DOING BUSINESS A WILDFLOWER CAFE

ADDRESS 8 CHESTNUT ST.P.O. BOX 1597

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02331

MANAGER: BISSETT, THOMAS TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

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EMPLOYER IDENTIFICATION NUMBER:

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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000032

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: FOODIES DUXBURY, LLC

DOING BUSINESS AS FOODIES DUXBURY MARKET

ADDRESS 46 DEPOT ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: LEON, VICTOR J

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

RETAIL GROCERY STORE WITH ENTRANCE AND EXIT AT FRONT AND REAR OF BUILDING

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000035

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: BRAMBLEBUSH EATS, LTD

DOING BUSINESS AS THE SUN TAVERN

ADDRESS 500 CONGRESS ST

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: FRIEDMAN,
LAWRENCE

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

2 STORY STRUCTURE WITH HALF CELLAR. ONE EXIT IN FRONT AND ONE IN REAR FOR PATRONS. ONE EXIT IN REAR OF KITCHEN

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000037

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DUXBURY MARITIME SCHOOL, INC.

DOING BUSINESS AS DUXBURY MARITIME SCHOOL, INC.

ADDRESS 457 WASHINGTON STREET

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: LEONARD,
CHARLES R.

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO STORY WOOD FRAME BUILDING WITH EIGHT EGRESSES VIA PASSAGE DOORS AND SIX OVERHEAD GARAGE DOORS. ALCOHOL TO BE SERVED IN THE CLIFFORD HALL ROOM SECOND FLOOR WITH TWO STAIR CASES DOWN TO FIRST FLOOR IN THE BOAT SHED ROOM WITH THREE EGRESSES VIA PASSAGE DOORS AND SIX OVERHEAD GARAGE DOORS ON THE REAR DECK AND REAR LAWN FACING EAST AND ON THE PATIO ADJACENT TO THE BOAT SHED.

I hereby certify and swear under penalties of perjury that:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000038

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: BO-TES DUXBURY LLC

DOING BUSINESS AS BO-TES DUXBURY

ADDRESS 1514 TREMONT STREET

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: CAMPANELLI,
THOMAS

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FIRST FLOOR CONSISTING OF A TOTAL OF APPROX. 1914 SQ FT...FIRST FLOOR WILL INCLUDE FOOD AND WINE/MALT PRODUCTS...FULL BASEMENT BELOW FOR STORAGE CONSISTING OF APPROX. 1914 SQ FT...ONE ENTRANCE IN FRONT AND TWO EMERGENCY EXITS IN REAR...ONE TO BE USED FOR DELIVERIES

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000039

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: KBBJ MARKETPLACE INC.

DOING BUSINESS AS SANDY LAMBERT'S MARKETPLACE

ADDRESS 277 SAINT GEORGE STREET

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: BARRY, SANDRA TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

APPROX. 35X45 IN WOOD FRAMED BUILDING..TWO DOORS FACING ST GEORGE STREET..TWO DOORS IN REAR FOR SERVICE

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000040

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DUXBURY YACHT CLUB

DOING BUSINESS AS

ADDRESS 489 WASHINGTON STREET

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: HART, DOUGLAS TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FITZGIBBONS HOUSE- WOOD STRUCTURE HOUSE (1,255 SQ.FT.) THREE -CAR GARAGE, SURROUNDING LAWNS AND PARKING LOT. PRIMARY ENTRANCE ON EAST SIDE INTO DINING ROOM; ADDITIONAL EXITS FROM EAST AND SOUTH WALLS OF LIVING ROOM; WEST SIDE OF STUDY; AND, NORTH SIDE OF THE DINING ROOM THROUGH A HALL PAST THE PANTRY. ALSO, SEASONALLY ENCLOSED PORCH 18X12' (216 SQ.FT) AND EXTERIOR STONE PATIO 27'X22' (594 SQ.FT)

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000041

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DUXBURY YACHT CLUB

DOING BUSINESS AS

ADDRESS 70 FAIRWAY LANE

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: HART, DOUGLAS TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

SPRAGUE/PARKER CLUBHOUSE- WOOD STRUCTURE (1,150 SQ.FT.), 18 HOLE PRIVATE GOLF COURSE, OUTDOOR POOL AND TENNIS COURTS. NINE SETS OF DOORS ON SOUTH, WEST AND NORTH SIDE OF GREAT ROOM WITH DIRECT ACCESS TO ROOFED SEASONAL PORCH 168.5'X12' RORALLING (2,858 SQ.FT)

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 030000042

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DUXBURY YACHT CLUB

DOING BUSINESS AS

ADDRESS 23 MATTAKEESETT COURT

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: HART, DOUGLAS TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ELLISON WATERFRONT CLUBHOUSE-WOOD STRUCTURE, APPROX. 49.5'X43' AND 16'X20'
TOTALING (2,449 SQ.FT) MAIN EGRESS DOOR ON WEST SIDE OF GREAT ROOM:
ADDITIONAL EXITS FROM KITCHEN ON SOUTH SIDE, AS WELL AS 2 EXITS ON THE
NORTH SIDE; 5 SETS OF DOORS ON EAST OR WATERFRONT SIDE TO A ROOFED PORCH,
SEASONALLY ENCLOSED 15.5'X70' TOTALING (1,085 SQ.FT)

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 03000036

CITY OR TOWN DUXBURY

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: PILGRIM GOLF LLC

DOING BUSINESS AS NORTH HILL COUNTRY CLUB

ADDRESS 47 MERRY AVENUE

CITY/TOWN: DUXBURY

STATE: MA

ZIP CODE: 02332

MANAGER: SHEEHAN,
EMMETT S.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY BUILDING CONSISTING OF BAR AREA, GRILL ROOM, KITCHEN, OUTSIDE PUTTING GREEN AREA WITH SPACE TO ACCOMMODATE 100' TENT FOR FUNCTIONS, TWO OUTSIDE PATIOS MEASURING 84X10' AND 70'X10', HALLWAY, KITCHEN, STORAGE UNITS ON THE FIRST FLOOR WITH ADDITIONAL STORAGE IN BASEMENT...SIX ENTRANCES AND EXITS: THREE DIRECTLY INTO THE GRILL ROOM, ONE INTO THE KITCHEN STORAGE UNIT, ONE INTO THE KITCHEN, AND ONE INTO THE HALLWAY LEADING TO THE GRILL

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

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DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

